

TRANSMITTAL FORM FOR LEGISLATION

To Mayor's Office:

Greg Pridgeon

(for review and distribution to Executive Management)

Chief of Police Signature: _____

Deputy Chief Signature: _____

From: Originating Dept.: **POLICE**

Contact (Name): _____

Committee(s) of Purview: **PUBLIC SAFETY/LEGAL**

Committee Deadline: _____

Committee Meeting
Dates: _____

City Council Meeting
Date: _____

CAPTION:

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BACKGROUND/PURPOSE/DISCUSSION:

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FINANCIAL IMPACT (if any):

NONE.

PERSONNEL IMPACT:

NONE.

Mayor's Staff Only

Received by Mayor's Office (Date): _____

Reviewed (Initials): _____

Date: _____

Action by Committee:

_____**APPROVE**
 D

_____**ADVERSE**
 D

_____**HELD**

_____**AMENDED**

_____**SUBSTITUT**
 E

_____**REFERRED**

_____**OTHER**